

MEDICAL PLAN COST COMPARISONS

This cost comparison shows how each medical plan would process the same service and what costs the plan member would be responsible for paying. The example is **cumulative** with respect to deductibles and coinsurance. The first line of each example shows the total costs to the member. The next three lines show how that cost is divided between copays, costs applied to the deductible, and coinsurance costs. It does not include premium costs, which are outlined on pages 8 and 9. These examples assume the services were for one member. This is simply an example for ease of plan comparison and is not a guarantee that similar services will process identically.

Sample Services	TRADITIONAL		MANAGED CARE PLANS	
	Allowable Charge		In-Network	Out-of-Network
Office visits 1, 2, & 3 (\$50 each)	\$150	You pay → \$75	\$45	\$150
Copay costs			\$45 (\$15/each)	
Costs applied to deductible		\$50*		\$150
Coinsurance costs		\$25		
Lab charges with office visit 1	\$75	You pay → \$75	\$75	\$75
Copay costs				
Costs applied to deductible		\$75	\$75	\$75
Coinsurance costs				
Specialist Visit (i.e. dermatologist)	\$200	You pay → \$200	\$15	\$200
Copay costs			\$15	
Costs applied to deductible		\$200		\$200
Coinsurance costs				
Preferred hospital inpatient	\$8,500	You pay → \$1,880	\$2,368.75	\$3,023.75
Copay costs				
Costs applied to deductible		\$225	\$325	\$75
Coinsurance costs		\$1,655	\$2,043.75	\$2,948.75
OR				
Nonpreferred hospital inpatient	\$8,500	You pay → \$3,121.25	N/A	N/A
Copay costs				
Costs applied to deductible		\$225		
Coinsurance costs		\$2,896.25		

*First two office visits are exempt from the deductible for this comparison.